## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
RECLAIM AMERICA PAC	C C00500025
	0
Check if X 24-hour report 48-hour report New report Amends report filed	on M M / D D / Y Y Y Y
Full Name of Payee Red Sea LLC	Date of Public Distribution/Dissemination
Mailing Address 4550 Montgomery Ave.	10 23 7 2014
Ste. 906	Amount
City State Zip Code	18365.00
Bethesda MD 20814	Transaction ID : SE.4186 Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Media Production  Category/ Type 004	10 23 / 2014
Name of Federal Candidate Support Office	e Sought: House District: 00
JONI K ERNST Oppose	President State: IA
Calendar Year-To-Date Per Election for Office Sought  Disbut 2014	ursement For: Primary ⊠ General  Other (specify) ▶
Full Name of Payee Smart Media Group	Date of Public Distribution/Dissemination
<u> </u>	10 23 2014
Mailing Address 814 King St., Ste. 400	Amount
City State Zip Code	89975.00
Alexandria VA 22314	Transaction ID : SE.4187  Date of Disbursement or Obligation
Purpose of Expenditure IE-Ernst-Media Buy  Category/ Type  004	10 23 2014
	e Sought: House District: 00
JONI K ERNST Oppose	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought  Disb 2014	ursement For: Primary X General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	108340.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	108340.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 410	0 24 2014
Signature	